

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

---

In re Patent Application of:  
Haga et al.

Art Unit: 1646

Application No: 10/069,541

Examiner: O. N. Chernyshev

Confirmation No: 1435

Filed: February 27, 2002

Atty. Docket No: 31671-176438

For: HIGH-AFFINITY CHOLINE  
TRANSPORTER

---

Customer No:

**26694**

PATENT TRADEMARK OFFICE

**REQUEST TO REAPPLY ISSUE FEE PAYMENT**

MS ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the second Notice of Allowance and Issue Fee Due mailed July 1, 2008, Applicant respectfully requests and authorizes the Director to hereby reapply the payment of the first Issue Fee made on December 14, 2007, in the amount of \$1,440.00 from Deposit Account No. 22-0261, toward this second Issue Fee Due on October 1, 2008.

Applicant resubmits a copy of the following (December 14, 2007) as-filed documents:

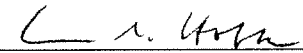
1. Our Filing Receipt with the U.S. Patent and Trademark Office's dated stamp;
2. Transmittal Form PTO/SB21;
3. Fee Transmittal Form PTO/SB17 indicating a payment of \$1,440.00, and
4. Part B – Fee Transmittal Form PTOL-85

The Director is hereby authorized to the charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 22-0261

Dated: 9/3/08

Respectfully submitted,

#980508

By 

Ann S. Hobbs

Registration No.: 36,830

VENABLE LLP

P.O. Box 34385

Washington, DC 20043-9998

(202) 344-4000

(202) 344-8300 (Fax)

Attorney/Agent For Applicant

# PATE PROSECUTION RECEIPT OF FILING

**143679**

Attorney/LAA: ASH/cib  
 PTO Due Date: January 25, 2008  
 Current Date: December 14, 2007  
 Filing Date: February 27, 2002  
 Issue Date: \_\_\_\_\_

Venable Filing Number: \_\_\_\_\_  
 Atty. Docket No: 31671-176438  
 Title of Application: HIGH-AFFINITY CHOLINE TRANSPORTER  
 Application No: 10/069,541  
 Patent No.: \_\_\_\_\_

The following items were received from Venable LLP, Washington, D.C., by the U.S. Patent & Trademark Office on the date stamped hereon:

## U.S. PTO FEES ENCLOSED

☒ Transmittal Letter  
☒ Fee Transmittal Letter  
 New U.S. Patent Application  
 (\_\_\_\_ pages of specification/claims)  
 Rule 53(d) Continued Prosecution Application  
 Rule 53(b) Continuation or Divisional Application  
 (attach copy of specification, claims, drawings and declaration)  
 U.S. National Stage Application of PCT Application  
 Request for Continued Examination (RCE) under 37 CFR 1.114  
 Application Data Sheet  
 Substitute Specification  
 Priority Document-Cert. Copy of  
 Appln.#: \_\_\_\_\_; Country: \_\_\_\_\_; Date Filed: \_\_\_\_\_  
 Formal Drawings (\_\_\_\_ sheets, Figs.)  
 Inventor Declaration  
 Assignment w/Cover Sheet  
 Response to Notice to File Missing Parts  
 Response to Notice to File Missing Requirements  
 Response to Requirement  
 Information Disclosure Statement with cited references  
 Response  
 Amendment / Preliminary Amendment  
 Petition/Request for Extension of Time (mo. ext.)  
 Power of Attorney  
 Petition to Revoke  
 Sequence Listing – CDR Enclosed? ☐ Yes ☐ No  
 Request for Non-Publication  
 Request to Rescind Non-Publication Request  
 Terminal Disclaimer  
 Notice of Appeal  
 Appeal Brief (in triplicate) / Reply Brief (in triplicate)  
 Request for Oral Hearing  
 Confirmation of Hearing Petition  
☒ Issue Fee Transmittal  
 Certificate of Correction  
 Maintenance Fee Transmittal  
 Status Inquiry  
 Other: (Please describe below) \_\_\_\_\_

\_\_\_\_\_  
 Filing Fee  
 \_\_\_\_\_  
 Search Fee  
 \_\_\_\_\_  
 Examination Fee  
 \_\_\_\_\_  
 Additional Claim Fee  
 \_\_\_\_\_  
 Extension Fee  
 \_\_\_\_\_  
 IDS Fee  
 \_\_\_\_\_  
 Recordation Fee  
 \_\_\_\_\_  
 Notice of Appeal Fee  
 \_\_\_\_\_  
 Brief on Appeal  
 \_\_\_\_\_  
 Oral Hearing Request Fee  
 \_\_\_\_\_  
 Petition Fee  
 \_\_\_\_\_  
 \$1,440.00 Issue Fee  
 \_\_\_\_\_  
 Publication Fee  
 \_\_\_\_\_  
 Certificate of Correction Fee  
 \_\_\_\_\_  
 Maintenance Fee  
 \_\_\_\_\_  
 Other Fees (Describe) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \$1,440.00 Total Fees Paid

Charge the above fees as follows:

☒ USPTO Deposit Account No. 22-0261  
☐ USPTO Deposit Account No. \_\_\_\_\_  
☐ USPTO not to charge any Deposit Account

Reviewed By: [Signature]  
 Signature of Attorney

12/14/07  
 Date

**JKW**

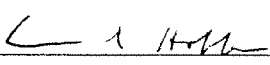
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/069,541-Conf. #1435
	Filing Date	February 27, 2002
	First Named Inventor	Tatsuya Haga
	Art Unit	1649
	Examiner Name	O. N. Chernyshev
	Attorney Docket Number	31671-176438

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="padding-left: 20px;">Issue Fee Transmittal</div>
<div style="border: 1px solid black; padding: 5px; min-height: 80px;"> <div style="border: 1px solid black; display: inline-block; padding: 2px 5px;">Remarks</div> </div>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

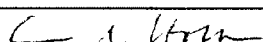
Firm Name	VENABLE LLP		
Signature			
Printed name	Ann S. Hobbs		
Date	12/14/07	Reg. No.	36,830

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/069,541-Conf. #1435
		Filing Date	February 27, 2002
		First Named Inventor	Tatsuya Haga
		Examiner Name	O. N. Chernyshev
		Art Unit	1649
TOTAL AMOUNT OF PAYMENT		(\$)	1,440.00
		Attorney Docket No.	31671-176438

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>22-0261</u> Deposit Account Name: <u>Venable LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>					
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	210	105					
Multiple dependent claims	370	185					
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>Issue Fee Transmittal</u>				<u>1,440.00</u>			

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	36,830
Name (Print/Type)	Ann S. Hobbs	Telephone	(202) 344-4000
		Date	12/14/07